Docket No.: 114890

## APPLICATION FOR UNITED STATES PATENT DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYSTEMS AND METHODS FOR CREATING AND UPDATING AN INTERACTIVE 3D VISUALIZATION OF MEDIA INDICES

described and claimed in the specification:

_			
U	neci	cone	2

*a.	attached he	ereto.		
b.	filed on	as Application No	and amended on	(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed by me or my legal representatives or assigns within one year prior to this application are hereby claimed:

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s):

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

James A. Oliff, Reg. No. 27,075; William P. Berridge, Reg. No. 30,024; Kirk M. Hudson, Reg. No. 27,562; Thomas J. Pardini, Reg. No. 30,411; Edward P. Walker, Reg. No. 31,450; Robert A. Miller, Reg. No. 32,771; Mario A. Costantino, Reg. No. 33,565; Stephen J. Roe, Reg. No. 34,463; Joel S. Armstrong, Reg. No. 36,430; Christopher W. Brown, Reg. No. 38,025; Richard E. Rice, Reg. No. 31,560; Paul Tsou, Reg. No. 37,956; and Eric D. Morehouse, Reg. No. 38,565.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Typewritten Ful	ll Name			
of First or Sole	Inventor	Patrick		Chiu
**Inventor's Signature:		Given Name	Middle Initial	Family Name
**Date of Signa	ture:	1-8-04	•	
		Month	Day	Year
Residence:	Menle	o Park	CA	USA
	City		State or Province	Country
Citizenship:	USA			
	Post Office Address: (Insert complete	564 University Dr., Apt. 3		
	mailing address, including country)	Menlo Park, CA 94025, USA		
	of First or Sole  **Inventor's Sig  **Date of Signa  Residence:	**Date of Signature:  Residence: Menle C Citizenship: USA  Post Office Address: (Insert complete mailing address,	**Inventor's Signature:  **Date of Signature:  **Date of Signature:	of First or Sole Inventor  **Inventor's Signature:  **Date of Signature:

<sup>\*</sup>If Box (a.) is checked, this form may be executed only when attached to the specification (including claims).

<sup>\*\*</sup>Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

# PAGE 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

1 Typewritten	ruli Name			
of Second Joint Inventor (if any)		Tohru		Fuse
2 **!	Si	Given Name	Middle Initial	Family Name
<ul><li>2 **Inventor's</li><li>3 **Date of Si</li></ul>				
5 Date of Si	gnature.	Mandh	D	
Residence:		Month	Day	Year
Residence.	Fuj	isawa City	Kanagawa	Japan
		City	State or Province	Country
Citizenship:	_ Japan	<u> </u>		
	Post Office Address (Insert complete	s: 401 Fujisawa Garden 8-5 Minami-Fujisawa	House	
	mailing address, including country)	Fujisawa City, Kanage	awa 251-0055, Japan	
1 Typewritten	Full Name			· · · · · · · · · · · · · · · · · · ·
of Third Joint Inve		Kyuman		Song
•		Given Name	Middle Initial	Family Name
2 **Inventor's	Signature:			
3 **Date of Si	gnature:			
		Month	Day	Year
Residence:	Ca	mbridge	MA	U.S.A.
		City	State or Province	Country
Citizenship:	South Korea	City	State of 1 Towniec	Country
•	Post Office Address	:		
	(Insert complete	36 Walker St. #2		
	mailing address, including country)	Cambridge, MA 0213	8	
1 Typewritten				
of Fourth Joint Inv	entor (if any)	Laurent		Denoue
2 **Inventor's	Signature:	Given Name	Middle Initial	Family Name
3 **Date of Si		01	80	2004
2 24.0 0. 5.		Month	Day	Year
	Pz	alo Alto	CA	USA
Residence:				
		City	State or Province	Country
Citizenship:	France			
	Post Office Address (Insert complete	: 885 Fielding Drive	1, 10, 10, 10, 10, 10, 10, 10, 10, 10, 1	
	mailing address, including country)	Palo Alto, CA 94303	, USA	
1 Typewritten				
of Fifth Joint Inven	tor (if any)	Surapong		Lertsithichai
2 **Inventor's	Signatura:	Given Name	Middle Initial	Family Name
2 **Inventor's Signature: 3 **Date of Signature:		1/8/04	1.	
Duic of Si	Enature.	Month	Day	Year
B 11	14-		· ·	
Residence:	IVIOUI	ntain View	CA	USA
Citizan	The Heart	City	State or Province	Country
Citizenship:	Thailand			
	Post Office Address (Insert complete	2101 California #109	)	<del></del> -
mailing addres including coun		Mountain View, CA	94040, USA	

Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.

IF THERE IS MORE THAN FIVE INVENTORS USE PAGE 3 AND PLACE AN "X" HERE  $\ igotimes$ 

# PAGE 3 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

Typewritten I of Second Joint Inve		Lynn		Wilcox
, • • • • • • • • • • • • • • •		Given Name	Middle Initial	Family Name
**Inventor's S	Signature:	Asm		
**Date of Sig			8	04
		Month	Day	Year
Residence:	Palo A	lto	CA	USA
	City	,	State or Province	Country
Citizenship:	USA			
	Post Office Address: (Insert complete	555 Stanford Avenu	e	
	mailing address, including country)	Palo Alto, CA 9430	6, USA	
Typewritten I				
Third Joint Inven	tor (if any)	- C: V:		
**Invantad= 6	Signatura:	Given Name	Middle Initial	Family Name
**Inventor's S  **Date of Sig				
Date of Sig	matule.	Month	Day	Year
Residence:		MOUNI	Day	ा एवा
residence:				
	City		State or Province	Country
Citizenship:				
	Post Office Address:			
	(Insert complete			
	mailing address,	· <del></del>		
	including country)			
Typewritten I	Full Name			
Fourth Joint Inve	ntor (if any)	G: N		
**Inventor's S	Signature:	Given Name	Middle Initial	Family Name
**Date of Sig				
Date of Sig	,	Month	Day	Year
		MOHUI	Day	i Cai
Residence:				<del> </del>
	City		State or Province	Country
Citizenship:				
	Post Office Address: (Insert complete			
	mailing address,			
	including country)			-,
Typewritten I				
Fifth Joint Invent	or (if any)	Given Nome	Middle Telain	Ea!l N1.
**Inventor's S	Signature:	Given Name	Middle Initial	Family Name
**Date of Sig				
_ =====================================		Month	Day	Year
Residence:			Duj	1 041
Residence:			Chaha an Dana'an	
	City		State or Province	Country
Citizenship:				
	Post Office Address:			
	(Insert complete			<del></del>
	mailing address, including country)			
	mendang country)			

Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.

Received at: 10:38PM, 1/9/2004

FROM:

FAX NO. :

May. 22 2003 01:10PM P1

Ducket No.: 114890

#### APPLICATION FOR UNITED STATES PATENT DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verity believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYSTEMS AND METHOLS FOR CREATING AND UPDATING AN INTERACTIVE 3D VISUALIZATION OF MEDIA INDICES.

described and claimed in the specification:

Check one					
*1	⊾ 🛭	attached her	reto.	•	
. 1	٠ ٣	filedon	as Amilication No.	and amended on	(if amplicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all Information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed by me or my legal representatives or assigns within one year prior to this application are hereby claimed:

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s):

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

James A. Oliff, Reg. No. 27,075; William P. Berridge, Reg. No. 36,024; Kirk M. Hudson, Reg. No. 27,562; Thomas J. Pardini, Reg. No. 36,411; Edward P. Walker, Reg. No. 31,458; Robert A. Miller, Reg. No. 32,771; Mario A. Contentino, Reg. No. 33,565; Stephen J. Roe, Reg. No. 34,463; Joel S. Armstrong, Reg. No. 36,33; Christopher W. Brown, Reg. No. 38,025; Richard E. Rice, Reg. No. 31,560; Paul Thou, Reg. No. 37,956; and Eric D. Morekousa, Reg. No. 38,565.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (743) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herem of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

	Typewritten F of First or Soi		Patrick		Chiu		
! :	**Inventor's S	entor's Signature:		Siven Nature Middle Initial		Family Name	
	Residence:		Monl	Month o Park	Day CA	Year USA	
	Citizenship:	City		ity	State or Province	Country	
		Post Office Add		564 University Dr., Apt. 3			
		mailing address including coun		Menlo Park, CA 94025, USA			

<sup>\*</sup>If Box (a.) is checked, this form may be executed only when attached to the specification (including claims).

<sup>\*\*</sup>Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE ☑

FROM:

FAX NO. :

### PAGE 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

	itten Full Name				
Second Job	at Inventor (V any)		Tohru	5414 M. P. 741.3	Fuse
	4-4-01		Given Name	Middle Initial	Family Name
•	dor's Signature:		1	<del></del>	2004
Dan	of Signature:		Month	Day	Year
Davidaces			<del></del>	•	
Residence:		Fujisarwa (	Xty	Kanagawa	Japan
	_	City		State or Province	Country
Citizenship	: Japan				
	Post Office		401 Tulleann Candan Mar		•
	(Insert comp	olete	401 Fujisawa Garden Ho 8-5 Minami-Fujisawa	use:	•
	mailing add	ress.			
	including co	untry)	Fujisawa City, Kanagawa	251-0055, Јарап	1.
Typeur	itten Full Name	•			
Third Joins.	Inventor (If any)		Куптел		Song
			Given Name	Middle Initial	Family Name
	ntor's Signature:		auns	75	2004
-*Date	of Signature:		Month	Day	Year
Residence:		Cambride	28	MA	U.S.A.
		City		State or Province	Country
Citizenship	South Kore	2			
	Post Office				
	(Insert com		36 Walker St. #2		
	mailing add including co		Charlesides NA PRINCE		
		rand )	Cambridge, MA 02138		
	itten Full Name 4 Inventor (if any)		Laurent	•	Denoue
rounn Jun	e entermin (A mih)		Given Name	Middle Initial	Family Name
**Inve	ntor's Signature:				
**Date	of Signature:				·
		<u>.</u>	Month	Digy	Year
Residence:	. <u></u>	Palo Alt	0	CA .	USA
•		City		State or Province	Country
Citizenship	. France				
	Post Office	Address:			
	(Insert comp		885 Fielding Drive		
	mailing add				
	including co	runtry)	Palo Alto, CA 94303, U	\$A	<u> </u>
	itten Full Name			•	
Fifth Joint I	Inventor (if any)	•	Surapoug	5 at 4 84 10 517 1	Lectsifhichai
<u> </u>	mor's Signature:	•	Given Name	Middle Initial	Family Name
	of Signature:		<del></del>		
			Month	Day	Year
		Mountain V		CA	USA
Yandalana.	<del></del>	City		State or Province	Country
Residence:		aly		and or a softime	y
	,				
Residence: Citizenship		<del></del>			
	Post Office		2101 California #100		
	Post Office A	plete	2101 California #109		
	Post Office	picte ress,	2101 California #109  Mountain View, CA 9	4040. USA	

application to which it pertains.

IF THERE IS MORE THAN FIVE INVENTORS USE PAGE 3 AND PLACE AN "K" HERE

Received at: 10:38PM, 1/9/2004

FROM:

FAX NO. :

May. 22 2003 01:11PM P3

### PAGE 3 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

] Typewrit	tien Full Name			•	•
of Second Join	i Inventor (if any)		Lynn		Wilcox
			Given Name	) // Middle Initial	Family Name
2 **Inven	tor's Signature:		_ Om	wyo	
3 **Date o	of Signature:			· · · · · · · · · · · · · · · · · · ·	04
			Month	Day	Year
Residence		Palo Alt	٥	CA ·	AZU
		City		State or Province	Country.
Citizenship:	USA	• •			
•	Post Office A	ddesc			
	(Insert comple		555 Stanford Avenu	IC .	
•	mailing addre				
	including cou		Palo Alto, CA 9430	16, USA	
] Typewi	tten Full Name				
	Inventor (If any)				
o, 11214 10111 .			Given Name	Middle initial	Family Name
2 **Inven	tor's Signature:				
	of Signature:				
-			Month	Day	Year
Residence:	•			,	
RESIDERAE.		<del></del>	<del></del>		
		City		State or Province	Country
Citizenship:	•				
	Post Office A	Adress			
	(Insert comple				
	mailing addre				
	including cou	ntry)			
1 Tenevri	iten Full Name				
	Inventor (if any)				
•	,	· · · · · · · · · · · · · · · · · · ·	Given Name	Middle frital	Family Name
2 **Inven	tor's Signature:			· ,	
3 **Date (	of Signature:				
			Month	Day	Your
Residence:					
Kestornoe:	<del></del>	City		State of Province	Country
11		City		State of Province	County
Citizenship:	·				·
	Post Office A	ddress:		•	
	(Insert compl	etc			
	mailing addre				
	including cou	ntry)			
1 Typewri	iten Fell Name			•	
of Fifth Joins L	nventor (if ary)				
			Grven Name	Middle Initial	Family Name
	tor's Signature:				
3 **Date	of Signature:	<del></del>	<del> </del>		
		•	Month	Day	Year
Residence:				•	
	-	City		State or Province	Country
Citizenship:		•			•
		44			
	Post Office Ar (Insert compl				
	mailing addre		<del></del>		
	including cou				
91-4- 4- Y			4:	449	

tions on macrimus: Lieszes ziku tomas executa sa trabbenta upo tilistat tut actival dans of ristorias.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.